

Supplemental Application Data Sheet

Application Information

Application number::	10/789273
Filing Date::	02/27/04
Application Type::	Regular
Subject Matter::	Utility
Suggested Group Art Unit::	1644
CD-ROM or CD-R?::	None
Sequence submission?::	None
Computer Readable Form (CRF)?::	No
Title::	HUMANIZED ANTIBODIES THAT RECOGNIZE BETA AMYLOID PEPTIDE
Attorney Docket Number::	ELN-002CPCN3
Request for Early Publication?::	No
Request for Non-Publication?::	No
Total Drawing Sheets::	10
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Dale
Middle Name::	B.
Family Name::	SCHENK
City of Residence::	Burlingame
State or Province of Residence::	CA
Country of Residence::	US
Street of mailing address::	1542 Los Altos Drive

City of mailing address:: Burlingame
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94010-5941

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Guriq
Family Name:: BASI
City of Residence:: Palo Alto
State or Province of Residence:: CA
Country of Residence:: US
Street of mailing address:: 514 Rhodes Drive
City of mailing address:: Palo Alto
State or Province of mailing address:: CA
Postal or Zip Code of mailing address:: 94303

Correspondence Information

Correspondence Customer Number:: 00959

Representative Information

Representative Customer Number:: 00959

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	10/704070	11/07/03
This Application	Continuation of	10/388389	03/12/03
10/388389	Continuation-in-part of	10/010942	12/06/01
10/010942	An application claiming the benefit under 35 USC 119(e)	60/251892	12/06/00
10/010942	Continuation-in-part of	09/580015	05/26/00
09/580015	Continuation-in-part of	09/322289	05/28/99
09/322289	Continuation-in-part of	09/201430	11/30/98
09/201430	An application claiming the benefit under 35 USC 119(e)	60/080970	04/07/98



4-22-04

PTO/SB/21 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

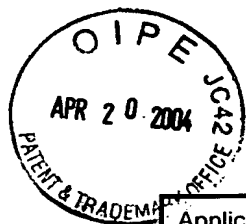
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/789273
		Filing Date	February 27, 2004
		First Named Inventor	Dale B. SCHENK
		Art Unit	1644
		Examiner Name	Not Yet Assigned
Total Number of Pages in This Submission	1	Attorney Docket Number	ELN-002CPCN3

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Certificate of Express Mailing (1 page) Supplemental ADS (3 pages) Return Receipt Postcard
<div>Remarks</div>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	LAHIVE & COCKFIELD, LLP Debra J. Milasincic - 46,981
Signature	
Date	April 20, 2004

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 378819017 US, in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.	
Dated: April 20, 2004	Signature: (Debra J. Milasincic)



Application No. (if known): 10/789273

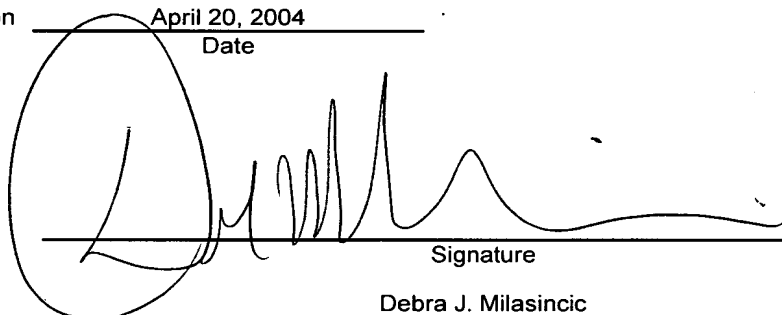
Attorney Docket No.: ELN-002CPCN3

Certificate of Express Mailing Under 37 CFR 1.10

I hereby certify that this correspondence is being deposited with the United States Postal Service as Express Mail, Airbill No. EV 378819017 US in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on April 20, 2004
Date


Signature

Debra J. Milasincic

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Certificate of Express Mailing (1 page)
Supplemental Application Data Sheet (3 pages)
Return Receipt Postcard